

☐ This is an initial* Statement of Organization 2008 JUN 20	6-19 Reset Form	FORM DR-1 (Rev. 04/2008)	STATEMENT OF ORGANIZATION
This is an amended* Statement of Organization *An initial Statement of Organization must be filed within 10 days of the commaking expenditures, or incurring indebtedness exceeding \$750. Amendment a change. Penalties may be imposed for late-filed Statements of Organization committee that exceeds \$750 in activity for another office shall file within 10 cd. DR-1 disclosing information concerning the campaign for the new office sough	nts must be filed within 30 days of in. A candidate with an open days either a new or amended	For Office Use Comm. # Indexed Audited Computer	only 57
COMMITTEE NAME + + (A candidate's committee must include the of Re-election of Wally Horn		f the committee.)	
IMPORTANT: Indicate type of committee you are exporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) S(5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision PAC (11) Local Ballo	litical Subdivision Candidate ( 8	County PAC (9.)	City DAC
COMMITTEE TREASURER (mandatory for all committees)  Name ↓ ↓	COMMITTEE CHAIR (mand	atory except for a c	candidate's committee)
Mailing Address ↓ ↓	Mailing Address ↓ ↓		
City, State ↓ ↓ Zip Code ↓ ↓	City, State ↓ ↓ Zip Code ↓ ↓		
Phone ( )	Phone ( )		****
e-Mail	e-Mail		
INDICATE PURPOSE OF COMMITTEE - Check One Box  Advo		dvocate for ballot iss dvocate against ball	
All Candidates Enter:	County/Local Candidates a	nd Local Ballot Co	mmittees Enter:
Office Sought:	County: (If active in multiple ballot issue	ue elections, attach	list of counties
District: 17	Date of Election:		
Year Standing for Election: 2010	Date of Election.		
Tear Clariding for Election. 2010			
Bank Account Name (must match committee name)	Candidate name & Address or P ↓ ↓ ↓ A	arent Entity (PACs ffiliate, or Sponsor	
Bank Account Name (must match committee name)			
Bank Account Name (must match committee name)  ↓ ↓  Name of Financial Institution/type of Account ↓ ↓	↓ ↓ <u>A</u>		
Name of Financial Institution/type of Account  Wells Fargo - Checking	→ → ▲  Mailing Address → →  City → →  Phone ( )	ffiliate, or Sponsor	Zip ↓ ↓
Bank Account Name (must match committee name)  Name of Financial Institution/type of Account  →  →  →  Name of Financial Institution/type of Account  →  →  →  →  →  →  →  →  →  →  →  →  →	Mailing Address ↓ ↓  City ↓ ↓  Phone ( )  e-Mail //cdem ©	ffiliate, or Sponsor	Zip ↓ ↓
Name of Financial Institution/type of Account  Wells Fargo - Checking Mailing Address + #	Mailing Address ↓ ↓  City ↓ ↓  Phone ( )  e-Mail //cdem ©	ffiliate, or Sponsor	Zip ↓ ↓
Bank Account Name (must match committee name)  Name of Financial Institution/type of Account  →  →  →  Name of Financial Institution/type of Account  →  →  →  →  →  →  →  →  →  →  →  →  →	Mailing Address   City   Phone ( )  e-Mail ///edem ©.  ms the following:	State ↓ ↓  MSN · Com	Zip ↓ ↓
Bank Account Name (must match committee name)  Name of Financial Institution/type of Account  Wells Fargo - Checking  Mailing Address   State   State   Zip   STATEMENT OF AFFIRMATION: By filling this document the committee affirm  The committee and all persons connected with the committee understand that the committee of the co	Mailing Address   City   Phone ( )  e-Mail /// Cdem Co.  ns the following:  hey are subject to the laws in lowa Coorer reports and that the failure to file the	State   State   MSN Complete Chapters 68A and descriptors on or before	Zip ↓ ↓  68B and the administrative
Name of Financial Institution/type of Account  Starp - Checking  Mailing Address	Mailing Address   City   Phone ( )  e-Mail // Cdem Community    mathefollowing:  hey are subject to the laws in lowa Community    re reports and that the failure to file the lidate's committee) to the automatic as placement of the words "paid for by" and hes to register a committee name for the storegister as committee name for the storegi	State   State   MSN Com  de chapters 68A and elese reports on or beforesessment of a civil period the name of the conditions.	Zip ↓ ↓  68B and the administrative  ore the required due dates enalty and the possible
Name of Financial Institution/type of Account  Name of Financial Institu	Mailing Address   Mailing Address   City   Phone ( )  e-Mail   Address   Phone ( )  e-Mail   Address   Address   Phone ( )  e-Mail   Address   Address   Phone ( )  e-Mail   Address   Pho	State   State   Complete the control of the control	Zip ↓ ↓  68B and the administrative  ore the required due dates enalty and the possible  mmittee on all political shorter "paid for by" and
Name of Financial Institution/type of Account  Name of Financial Institution  Name of Financial Institution  Name of Fi	Mailing Address   Mailing Address   City   Phone ( )  e-Mail   Address   Phone ( )  e-Mail   Add	State   State   Complete the control of the control	Zip ↓ ↓  68B and the administrative  for the required due dates enalty and the possible  mmittee on all political shorter "paid for by" and  for statewide and local ballot
Name of Financial Institution/type of Account  Name of Financial Institution  Name of Financial Institution  Name of Each of Account  N	Mailing Address   City   Phone ( )  e-Mail // Cdem Co  me the following:  they are subject to the laws in lowa Coo	State   State   MSN Com  de chapters 68A and elese reports on or beforesessment of a civil period the name of the coordinates of using the coordinates of the coordinates of using the coordinates of using the coordinates of using the coordinates of the coo	Zip ↓ ↓  68B and the administrative  ore the required due dates enalty and the possible  mmittee on all political shorter "paid for by" and  for statewide and local ballot and rule 351—4.25.
Name of Financial Institution/type of Account  Address  City  State  State  Tip  STATEMENT OF AFFIRMATION: By filling this document the committee affirm  The committee and all persons connected with the committee understand that the rules in Chapter 351 of the lowa Administrative Code.  That lowa Code section 68A.402 and rule 351—4.9 require the filling of disclosus subjects the candidate or chairperson (in the case of committees other than a cand imposition of other criminal and civil sanctions.  That lowa Code section 68A.405 and rules 351—4.38 through 4.43 require the materials except for those items exempted by statute or rule. A committee that wis does not intend to cross the \$750 filing threshold shall file the Form DR-SFA form if 4. That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the issue PACs.  A candidate and a candidate's committee may only expend campaign funds as 5. That the committee will continue to file disclosure reports until all activity has ce dissolution (DR-3) has been filed.	Mailing Address   City   Phone ( )  e-Mail // Cdem Co  me the following:  they are subject to the laws in lowa Coo	State   State   MSN Com  de chapters 68A and ease reports on or beforesessment of a civil pend the name of the coordinates of using the coordinates of the	Zip ↓ ↓  68B and the administrative  ore the required due dates enalty and the possible  mmittee on all political shorter "paid for by" and  for statewide and local ballot and rule 351—4.25.
Name of Financial Institution/type of Account  Name of Financial Institution  Name of Financial Institution  Name of Financial Institution/type of Account  Name of Financial Institution  Name of Financ	Mailing Address   City   Phone ( )  e-Mail // Cdem Co  me the following:  they are subject to the laws in lowa Coo	State   State   MSN Com  de chapters 68A and esse reports on or beforesessment of a civil per and the name of the coordinates of using the licensmittees except the solution of the coordinate of the coordinates of using the licensmittees except the solution of the coordinates of using the licensmittees except the solution of the coordinates of the coordi	Zip ↓ ↓  68B and the administrative  ore the required due dates enalty and the possible  mmittee on all political shorter "paid for by" and  for statewide and local ballot and rule 351—4.25.